prevention and treatment of the patients affected by HIV/AIDS or Tuberculosis, through the State Governments and NGOs;

(b) if so, whether the salary, social security and self protection to Laboratory Assistants and such other medical technicians are fixed alongwith financial assistance to implement the scheme; and

(c) what are the steps to prevent the violations of guidelines given by Government in this regard?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) Care and Support for HIV infected persons is a component of NACP II. This has now been expanded to include free ART also. The treatment of various Opportunistic Infections, including Tuberculosis is also a part of Care and Support activity of the programme.

(b) The laboratory technicians at ART centres are employed on contract basis at Rs. 6500 per month. The Laboratory Assistants and Medical Technicians are trained on universal precautions for self protection and provided drugs for Post exposure prophylaxis in case of needle stick injury while caring for patients.

(c) The ART centre in-charge and concerned SACS are responsible for the implementation of guidelines. The ART centres are regularly visited by ART consultants from NACO.

Advertisement of soft drinks

1110. SHRI S.M. LALJAN BASHA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government have agreed to permit sale of soft drinks like Coca-Cola and Pepsi in hospitals and medical colleges;

(b) whether it is a fact that Government have been given encouragement to sale of soft drinks;

(c) whether Government have allowed favourable advertisements of sugar-based soft drinks in movies, TV and in hospitals; and

(d) what are the reasons for this positive attitude towards obesity-enhancing soft drinks?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) to (d) The information is being collected and will be laid on the Table of the House.

Assessment of NRHM through independent agencies

1111. SHRI M.V. MYSURA REDDY: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that his Ministry has tied up with several independent agencies to undertake a concurrent assessment of the National Rural Health Mission (NRHM) implemented in 2005;

(b) whether it is also a fact that Government are trying to identify local capacities to gauge the success of NRHM;

(c) if so, the details thereof alongwith the agencies tied up and the time-frame by which the reports will be submitted; and

(d) the details of States which are considered as low performing States, alongwith the reasons and the measures taken to improve the success of NRHM in these States?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) to (c) NRHM envisages a monitoring framework through three pronged process of community based monitoring, external studies and internal monitoring. The internal monitoring which is required to gauge success of NRHM initiatives, presupposes development of local capacities within the State Governments. The Ministry has also tied up with independent agencies to undertake concurrent assessment of national Rual Health Mission (NRHM). This includes following initiatives:

1. Evaluation of Immunisation activities through UNICEF. The preliminary report of this study has been received.
2. Review of financial systems is being undertaken through a pilot study which has been entrusted to institute of Public Auditors of India (IPAI).
3. Evaluation of ASHA initiative and JSY in States of MP, Rajasthan and Orissa is being carried out through UNFPA.
4. The Government also undertakes regular District Level Household